



**Section 1: "I would like to ask you (head of household or adult > 18 years) some questions about your household"**

Section 1.1: Household listings

**"I would first like to ask you some information about the members of your household and any temporary visitors to your household."**

Nr	First name (residents + visitors)	Relationship to head of household?	Gender (1...Male, 2...Female)	Age (years), if less than 1 year: 00	Age (months) if less than 1 year	Highest level of education	Usual resident or temporary visitor?	Currently pregnant? (01...Yes, 00...No, 99...Don't know/NA)	Slept here last night? (1...Yes, 0...No)
1.1	1.2	1.3 - code	1.4	1.5	1.6	1.7 - code	1.8 - code	1.9	1.10
01									
02									
03									
04									
05									
06									
07									
08									
09									
10									
11									
12									
13									
14									

Codes for relationship to head of household (1.3):

- 01...Head of household
- 02...Spouse
- 03...Son or daughter
- 04...Son-in-law or daughter-in-law
- 05...Grandchild
- 06...Parent
- 07...Parent-in-law
- 08...Brother or sister
- 09...Nice or nephew
- 10...Other relative
- 11...Adopted/foster/stepchild
- 12...Not related

Codes for highest level of education (1.7):

- 01...Never attended school
- 02...Some primary school
- 03...Completed primary school (grade 7)
- 04...Some secondary school
- 05...Completed secondary school O-level (Form 4)
- 06... Completed secondary school A-level (Form 6)
- 07...Higher education (university/college/vocational training)
- 99...Don't know

Codes for usual resident or visitor (1.8):

- 1...Usual resident
- 2...Temporary visitor

**"Just to make sure that I have a complete listing, are there any other persons living in your household that we have not listed, such as small children or infants?"**

- Go through list with respondent
- If yes, add these individuals to table above

**"Are there any other people living or staying here who may not be members of your family, such as visitors or friends or temporary workers?"**

- If yes, add these individuals to table above

Section 1.2: Household characteristics

**"Now I would like to ask you some general questions about this household."**

Q #	Questions and filters	Coding category	Answer (enter coding categories)
1.11	Who is responding to the questions?	01...Head of household 02...Partner of household head 03...Other adult in household, specify	_ _  _____
1.12	How old is the respondent?	<b>Age in years</b>	_ _  if less than 18, STOP
1.13	What is the main source of income in the household head?	01...Salary 02...Business 03...Farming/livestock keeping 04...Skilled labour/Entrepreneurship (fundi, tailor) 05...Casual labour (kibarua) 06...Fishing 07...Driver/taxi/bajaji 08...Student 09...Pension 10...No source of income 11...Other, specify	_ _  _____
1.14	What is the main material of the roof? <b>Observe</b>	01...Grass /palm thatch 02...Corrugated iron sheets 03... Other metal, e.g. korie 04... Tembe house (roofed with soil) 04... Other, specify	_ _  _____
1.15	What is the main material of the walls? <b>Observe</b>	01...Mud and sticks 02...Burned bricks 03...Cement bricks 04...Mud bricks (Matofali mabichi) 05...Other, specify	_ _  _____
1.16	What is the main material of the floor? <b>Observe</b>	01...Earth 02...Cement 03...Tiles 04...Carpet 05...Wood 06...Other, specify	_ _  _____
1.17	Are any of the windows screened with netting? <b>Observe</b>	01...Yes 00...No, go to 1.18	_ _
1.17a	What are the windows screened with? <b>Observe</b>	01...Wire mesh (metal/plastic) 02...Old bednet 03...Other material, specify	_ _  _____



			Satellite Dish/Cable	_ _
			Generator	_ _
			Air conditioner	_ _
			None of the above	_ _
1.25	Does the household (any member) have any of the following means of transport?  <b>Prompt each category</b>	01...Yes 00...No	Bicycle	_ _
			Motorbike	_ _
			Car/Truck	_ _
			Bajaji	_ _
			Animal/Cart	_ _
			Boat/Canoe/Jahazi	_ _
			None of the above	_ _
<b>Section 2: "Now I would like to ask you some questions about your bednets."</b>				
2.1	How many sleeping places are there in your household?  <b>Include all sleeping spaces where a net could be hung up, or has ever been hung up, including if there is more than one sleeping space in each room used for sleeping</b>			Indoors  _ _ _  Outdoors  _ _ _
2.1a	How many sleeping places <u>were used</u> last night in your household?			Indoors  _ _ _  Outdoors  _ _ _
2.2	How many mosquito nets that can be used for sleeping does your household have in total?  <b>Probe for nets not in use: stored, saved, unopened</b>			_ _

**Section 2.1: Prospective roster.**

**Interviewer to find household list in household folder and enter first net serial number into PDA.**

**"Now could you please show me the nets in your household. I will need access to the barcode that is attached to the net."**

Q #	Questions and filters	Coding Category	Net 1	Net 2	Net 3
2.3	Net serial number  <b>(from household list in household folder)</b>		_ _ _ _ _ _	_ _ _ _ _ _	_ _ _ _ _ _
2.4	Re-enter net serial number  <b>...once net is identified.</b>	<b>If net is no longer present, re-enter from household list.</b>	_ _ _ _ _ _	_ _ _ _ _ _	_ _ _ _ _ _



		10... Infested with bed bugs 11... Doesn't protect against mosquitoes 12...Other, specify 99...Don't know			
2.6.4	How did you discard of the net?  <b>Go to 2.6.10</b>	01...Burned inside the house 02...Burned outside the house 03...Buried 04...Threw away as rubbish, <u>specify where</u> 05...Recycled 99...Don't know	_ _	_ _	_ _
2.6.5	Why did you use the net for something else?	01...Too damaged for sleeping under 02...Did not like the net for sleeping under 03...More useful things to do with it 99...Don't know	_ _	_ _	_ _
2.6.6	If used for something else, what was it used for?  <b>Go to 2.6.10</b>	01...Screen windows/doors 02...Screen or fence toilet 03...Protect garden (fence in or cover crops from birds) 04...Protect animals (chickens or ducks) 05...Fishing 06...Mattress/pillow 07...Agriculture, e.g. dry cassava 08...Make rope 09...Stored for visitors 10...Other, specify 99...Don't know	_ _	_ _	_ _
2.6.7	If given away, to whom?	01...Neighbours 02...Children going to school/college 03...Parents	_ _	_ _	_ _

		04...Other relatives 05...Others, specify 99...Don't know	_____	_____	_____
2.6.8	If given away, why?	01...Too many nets in household <b>Go to 2.6.10</b> 02...Someone else needed net more <b>Go to 2.6.10</b> 03...Replaced it with a better net <b>Go to 2.6.9</b> 04...I do not like to use nets <b>Go to 2.6.10</b> 05...Other, specify <b>Go to 2.6.10</b> 99...Don't know <b>Go to 2.6.10</b>	_ _	_ _	_ _
2.6.9	If replaced by a better net, why did you like the replacement net more?  <b>Do not prompt. Record all reasons that the person mentions.</b>	01...Colour, specify which colour is preferred 02...Less damaged 03...Cleaner 04...More suitable size 05...More suitable length 06...Nicer texture / material 07...It was free 08... Other, specify 99...Don't know	_ _	_ _	_ _
2.6.10	When was the net lost from the household?  <b>Go to NEXT NET or if there are no more ABCDR nets, to Section 5</b>	01...less than 1 month ago 02...between 1 and 3 months ago 03...between 4 and 6 months ago 04...more than 6 months ago 05...more than 1 year ago 99...Don't know	_ _	_ _	_ _
2.7	Where is the net located?  <b>Observe</b>	01...Hanging loose over a sleeping space 02...Hanging and folded up or tied 03...Stored inside a bag 04...Stored but not in a bag	_ _	_ _	_ _

		05...Other, specify			
2.8	What type of sleeping space is the net used for?	01...Wooden bedframe 02...Stick bedframe 03...Iron bedframe 04...Mattress (no frame) 05...Reed mat (no frame) 06...Floor 07...Never used → go to 2.8a 08...Other, specify	_ _	_ _	_ _
2.8a	Why has the net never been used?  <b>Go to NEXT NET or if there are no more ABCDR nets, to Section 5</b>	01...Save the net for visitors 02...Save the net for future use 03...No place to hang up 04...Currently have enough nets in use 05...Other, specify	_ _	_ _	_ _
2.9	What is the main material of the roof in this room?  <b>Observe</b>	01...Grass /palm thatch 02...Corrugated iron sheets 03... Other metal, e.g. korie 04... Tembe house (roofed with soil) 04... Other, specify	_ _	_ _	_ _
2.10	What is the main material of the walls in this room?  <b>Observe</b>	01...Mud and sticks 02...Burned bricks 03...Cement bricks 04...Mud bricks (Matofali Mabichi) 05...Other, specify	_ _	_ _	_ _
2.11	What is the main material of the floor in this room?  <b>Observe</b>	01...Earth 02...Cement 03...Tiles 04...Carpet 05...Other, specify	_ _	_ _	_ _

2.12	Was this net used last night?	01...Yes <b>Go to 2.14</b> 00...No	_ _	_ _	_ _
2.13	If not, why not?  <b>Do not prompt. Record all reasons that the person mentions.</b>  <b>Go to 2.16</b>	01...User did not sleep here 02...Net was not available to use 03...Used a different net 04...No malaria now 05...No mosquitoes 06...Net too old or too torn 07...Net is dirty 08...Net full of bedbugs 09...Net too hot 10...Net too small 11...Net too big 12...Mesh size too big 13...Don't like the material 14...Don't like the colour 15... Don't like the smell 16...Net made me sneeze, itch, head ache 17...Other, specify 99...Don't know	_ _	_ _	_ _
2.14	Who used this net last night?	<b>Drop down menu with names from household roster 1.2. Follow up with "Is [name] x years old?"</b>  <b>Allow multiple choices</b>	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____
2.15	During the previous week, how many times has the net been used?	01...Every night 02...5-6 nights 03...1-4 nights 04...None of the nights	_ _	_ _	_ _

		99...Don't know				
2.16	Do you use any of the following sources for cooking, heating or lighting in the same room as the net?	01...Yes 00...No	Firewood Charcoal Gas Hurricane lamp Candle Koroboi Cigarettes	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.17	In the last 6 months, have you seen any rats or mice in this room or their traces (faeces or damage)?	01...Yes 00...No 99...Don't know		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.18	Do cats have access to this room?	01...Yes 00...No 99...Don't know		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.19	During which periods of the year is this net used to sleep under?	01...All year 02...Rainy season only 03...Dry season only 99...Don't know		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.20	Is this net ever used for sleeping under away from the main house?	01...Yes 00...No, <b>go to 2.21</b> 99...Don't know, <b>go to 2.21</b>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.20a	Where is the net used for sleeping under away from the main house?	01...Taken to school/college 02...Taken to other house 03...Taken to the farm hut/forest 04...Other, specify		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____
2.21	Do you tuck the net in at night?	01...Yes, <b>go to 2.22</b> 00...No 99...Don't know, <b>go to 2.22</b>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

2.21a	Why do you not tuck the net in?	01...Net not long enough 02...Nothing to tuck under 03...Feel too closed in 04...Too much effort 05...Other, specify	_ _	_ _	_ _
2.22	Has the net ever been washed?	01....Yes 00....No, <b>go to 2.27</b> 99....Don't know, <b>go to 2.27</b>	_ _	_ _	_ _
2.22a	How many times did you wash the net in the last year?	01...Once 02...Once every 6 months 03...Once every 3 months 04...Every month 99....Don't know	_ _	_ _	_ _
2.23	When was the last time you washed the net?	01...less than 1 month ago 02...between 1-3 months ago 03...between 4-6 months ago 04...between 6-12 months ago 05...more than 1 year ago 99...Don't know	_ _	_ _	_ _
2.24	What type of soap was used?	01....None 02....Local soap bar 03....Detergent powder 04....Mix (bar and detergent) 05....Bleach 99....Don't know	_ _	_ _	_ _
2.25	Was the net scrubbed hard or beaten on a hard surface?	01....Yes 00....No 99....Don't know	_ _	_ _	_ _

2.26	Where was the net dried?	01....Outside in the direct sun light 02....Outside in the shade 03....Inside 99....Don't know	_ _	_ _	_ _
2.27	Have you tried to fix any of holes in this net?	01....Yes 00....No, <b>go to 2.29</b>	_ _	_ _	_ _
2.28	How did you repair the hole?  <b>Go to 2.30</b>	01...Stitched 02...Knotted/tied 03...Patched 04...Other way, specify	_ _    _____	_ _    _____	_ _    _____
2.29	If not, what was the main reason?	01...Too busy/no time 02...Not necessary 03...Don't know how to fix 04...Too damaged to fix 05...Other, specify	_ _    _____	_ _    _____	_ _    _____
2.30	Has the net been modified?	01...Yes 00...No, <b>go to Section 3</b>	_ _	_ _	_ _
2.31	How was the net modified?	01...Shape was changed 02...Material was added to lengthen 03...Material was added to reinforce 04...Other, specify	_ _    _____	_ _    _____	_ _    _____

**Section 3**

***"I am going to read a series of statements to you and I would like you to tell me how much you agree with them"***

3.1	Which of these statements does best describe your net?	01... This net is still in a good condition and can be used without restrictions 02... This net is beginning to fall apart and should be replaced really soon 03... This net is no longer usable and definitely needs to be replaced	_ _	_ _	_ _
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**Section 4 Net inspection**

***"Now I will have a look at your nets and count the number of holes. The net will be returned to you and hung up again if you wish. We need to mount the net on a frame in order to find all the holes."***

**Interviewer to mount net 1 on net frame for hole counting. Make sure that only one net is done at a time and enter the data directly from tally sheet into the PDA.**

4.1	What type of holes are observed?  <b>Answer every category</b>	01...Yes	No holes – if 01, go to <b>Section 5</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		00...No	Horizontal tears at bottom	<input type="text"/>	<input type="text"/>	<input type="text"/>
			Holes at hanging points	<input type="text"/>	<input type="text"/>	<input type="text"/>
			Open seams	<input type="text"/>	<input type="text"/>	<input type="text"/>
			Burn holes	<input type="text"/>	<input type="text"/>	<input type="text"/>
			Holes from rodents	<input type="text"/>	<input type="text"/>	<input type="text"/>
			Whole section missing	<input type="text"/>	<input type="text"/>	<input type="text"/>
				<input type="text"/>	<input type="text"/>	<input type="text"/>
4.2	Number of holes in zone 1	Size 1 (finger)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 2 (fist)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 3 (head)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 4 (larger than head)		<input type="text"/>	<input type="text"/>	<input type="text"/>
4.3	Number of holes in zone 2	Size 1 (finger)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 2 (fist)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 3 (head)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 4 (larger than head)		<input type="text"/>	<input type="text"/>	<input type="text"/>
4.4	Number of holes in zone 3	Size 1 (finger)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 2 (fist)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 3 (head)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 4 (larger than head)		<input type="text"/>	<input type="text"/>	<input type="text"/>
4.5	Number of holes in zone 4	Size 1 (finger)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 2 (fist)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 3 (head)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 4 (larger than head)		<input type="text"/>	<input type="text"/>	<input type="text"/>
4.6	Number of holes in the roof	Size 1 (finger)		<input type="text"/>	<input type="text"/>	<input type="text"/>
		Size 2 (fist)		<input type="text"/>	<input type="text"/>	<input type="text"/>

		Size 3 (head)	_ _	_ _	_ _
		Size 4 (larger than head)	_ _	_ _	_ _
<b>Section 5 Additional Nets In Household</b>					
<i>“This part is about any additional nets apart from the ones you received from our study team last October you may have inside your household. Please could you show us the nets and spare some time to answer the subsequent questions.”</i>					
5.1	Do you own any additional nets in addition to the ones distributed by our study team?	01... Yes 00... No, <b>Go to NEXT SECTION</b>	_ _		
5.2	How many additional nets do you have?	<b>Enter number</b>	_ _		
			Net 1	Net 2	Net 3
5.3	Where is the net located?  <b>Observe, if unsure - ask</b>	01...Hanging loose over a sleeping space 02...Hanging and folded up or tied 03...Stored inside a bag 04...Stored but not in a bag 05...Other, specify	_ _     _____	_ _     _____	_ _     _____
5.4	What type of sleeping space is the net used for?  <b>Observe, if unsure - ask</b>	01...Wooden bedframe 02...Stick bedframe 03...Iron bedframe 04...Mattress (no frame) 05...Reed mat (no frame) 06...Floor 07...Never used → <b>go to 5.5</b> 08...Other, specify	_ _        _____	_ _        _____	_ _        _____
5.5	Why has the net never been used?  <b>Go to 5.11</b>	01...Save the net for visitors 02...Save the net for future use 03...No place to hang up 04...Currently have enough nets in use 05...Other, specify	_ _     _____	_ _     _____	_ _     _____



		99...Don't know			
5.10	How long ago did you start using this net?	01...Less than 1 week ago 02...Between 1 week and 1 month ago 03...Between 1-6 months ago 04...Between 6-12 months ago 05...More than 1 year ago 06...Never used 99...Don't know	_ _	_ _	_ _
5.11	What is the colour of the net?  <b>Observe</b>	01...White 02...Light blue 03...Blue & white stripes 04...Dark blue 05...Green 06...Other	_ _	_ _	_ _
5.12	What is the shape of the net?	01...Round 02...Rectangular	_ _	_ _	_ _
5.13	What is the size of the net?	01...Single 02...Double 03...Extra-large	_ _	_ _	_ _
5.14	What is the brand of the net?  <b>Check label if present</b>	01...Olyset / A-Z / Sumitomo 02...Safinet 03...PermaNet / Vestergaard Frandsen 04...Netprotect / BestNet 05...Interceptor / BASF 06...LifeNet / Bayer 07...Yorkool	_ _    _____	_ _    _____	_ _    _____

		08...DawaPlus / Tana Netting 09...Duranet / Clarke 10...Royal Sentry 11...MAGNet 12...Afyant 13...Health net Ltd / Net health Ltd 14...Other, specify 99..Don't know, no label			
5.15	How long ago did you obtain this net?	01...Less than 1 week ago 02...Between 1 week and 1 month ago 03...Between 1-6 months ago 04...Between 6-12 months ago 05...More than 1 year ago 99...Don't know	_ _	_ _	_ _
5.16	Where did you obtain this net from?	01...Received as a gift from relative /friend/neighbour 02...Bought in shop/market 03...Received from hospital/dispensary 04...Received from NGO/charity 05...Received from government campaign 06...Other, specify 99...Don't know	_ _    _____	_ _    _____	_ _    _____
5.17	Did you pay money for this net?	01...Yes 00...No 99...Don't know	_ _	_ _	_ _
5.18	Did you use a voucher to obtain this net?	01...Yes 00...No	_ _	_ _	_ _

		99...Don't know				
5.19	Does the net have any open holes/tears/seams?  <b>Observe inside the house</b>	01...Yes  00...No, <b>Go to 5.22</b>		_ _	_ _	_ _
5.20	What type of holes are observed?  <b>Observe inside the house</b>  <b>Answer every category</b>	01...Yes  00...No	Horizontal tears at bottom  Holes at hanging points  Open seams  Burn holes  Holes from rodents  Whole section missing	_ _   _ _	_ _   _ _	_ _   _ _
5.21	Is there any evidence of repair of the net?  <b>Observe inside the house</b>	01...Yes  00...No		_ _	_ _	_ _

\*\*\*\*\* END OF THE QUESTIONNAIRE \*\*\*\*\*

Please write whether there were any comments about the study or the nets / any messages from the households.

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 .....